FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FECHAILGENTER

2023 JAN 30 AM 11: 36

Office Use Only

	NAME O	F TEE (in full)	TYPE OR P	PRINT ▼		mple: If typing, type the lines.	12F	FE4M5		
United Medical Freedom Super PAC, LLC										
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_	Che	ck if different previously rted. (ACC)								
L			Portla	ınd			TN	371	48	5912
2.	P. FEC IDENTIFICATION NUMBER ▼ (CITY A TOTAL STATE A ZIP CODE A									
	C o	753319		2 1 S 3!	IS THIS	NEW (N) C	R L	AMENDE (A)	ED	
4.	TYPE (Choose	OF REPORT One)	: (b) Mon Rep	ort 🔲 🗀	eb 20 (M2)	May 20 (M5)	Aug 20 (M	8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Qua	rterly.Reports: '.')	1	On: M	ar 20 (M3)	Jun 20 (N	<i>M</i> 6)	Sep 20 (M	9)	Dec 20 (M12) (Non-Election Year Only)
	1 1	A-il 15	,	-	or 20 (M4)	Jul 20 (M	17)	Oct 20 (M	10)	Jan 31 (YE)
	Ц	April 15 Quarterly Report (Q1) (c)	12-Day	П	Primary (12P)	П	General (12G)	П	Runoff (12R)
		July 15 Quarterly Report (Q2) V: ;	PRE-Election . Report for the:						
		October 15 Quarterly Report (Q3)	neport for the.	L	Convention (12C)	LI,	Special (12S)		
	×	January 31 Year-End Report (YE)	Elec	tion on	M W / D V O	, Y.Y		in the State of	of [
		July 31 Mid-Year Report (Non-electi Year Only) (MY)	on (d)	30-Day POST-Election Report for the:		General (30G)		Runoff (30R)		Special (30S)
		Termination Repor (TER)			tion on	, i	1.		in the State o	of .
5. Covering Period 10 01 2022 through 12 12 2022										
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.										
Type or Print Name of Treasurer Ty M. Bollinger										
Signature of Treasurer Date 1 31 2023										
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.										
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